

ROCK COUNTY HEALTH CARE CTR-FDD
3530 N CTY TRK HWY F PO BOX 351

JANESVILLE 53547 Phone:(608) 757-5000

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 24

Total Licensed Bed Capacity (12/31/04): 24

Number of Residents on 12/31/04: 24

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? No

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 23

County

FDDs

No

No

Yes

23

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		8.3
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		29.2
Supp. Home Care-Household Services	No	Developmental Disabilities	91.7	Under 65	79.2	More Than 4 Years		62.5
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	8.3			-----
Respite Care	No	Mental Illness (Other)	4.2	75 - 84	12.5			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	0.0	65 & Over	20.8	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		5.8
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		5.8
Other Services	No	Respiratory	0.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	4.2	Male	62.5	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	37.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	24	100.0	189	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	24	100.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	0	0.0		24	100.0		0	0.0		0	0.0		0	0.0		0	0.0		24	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	0.0	54.2	45.8	24
Other Nursing Homes	0.0	Dressing	0.0	54.2	45.8	24
Acute Care Hospitals	0.0	Transferring	45.8	29.2	25.0	24
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	16.7	45.8	37.5	24
Rehabilitation Hospitals	0.0	Eating	50.0	29.2	20.8	24
Other Locations	100.0	*****				
Total Number of Admissions	2	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	0.0		Receiving Respiratory Care	4.2
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	83.3		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	66.7		Receiving Suctioning	0.0
Other Nursing Homes	0.0				Receiving Ostomy Care	4.2
Acute Care Hospitals	0.0	Mobility			Receiving Tube Feeding	4.2
Psych. Hosp.-MR/DD Facilities	100.0	Physically Restrained	41.7		Receiving Mechanically Altered Diets	58.3
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	0.0	With Pressure Sores	0.0		Have Advance Directives	33.3
Total Number of Discharges		With Rashes	0.0		Medications	
(Including Deaths)	1				Receiving Psychoactive Drugs	66.7

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities					

	This Facility %	FDD Facilities %	Ratio	All Facilities %	Ratio

Occupancy Rate: Average Daily Census/Licensed Beds	95.8	93.1	1.03	88.8	1.08
Current Residents from In-County	91.7	35.3	2.60	77.4	1.18
Admissions from In-County, Still Residing	100.0	11.4	8.81	19.4	5.15
Admissions/Average Daily Census	8.7	20.4	0.43	146.5	0.06
Discharges/Average Daily Census	4.3	28.3	0.15	148.0	0.03
Discharges To Private Residence/Average Daily Census	0.0	12.1	0.00	66.9	0.00
Residents Receiving Skilled Care	0.0	0.0	0.00	89.9	0.00
Residents Aged 65 and Older	20.8	16.0	1.30	87.9	0.24
Title 19 (Medicaid) Funded Residents	100.0	99.1	1.01	66.1	1.51
Private Pay Funded Residents	0.0	0.5	0.00	20.6	0.00
Developmentally Disabled Residents	91.7	99.2	0.92	6.0	15.19
Mentally Ill Residents	4.2	0.4	11.62	33.6	0.12
General Medical Service Residents	4.2	0.4	11.62	21.1	0.20
Impaired ADL (Mean)*	58.3	55.0	1.06	49.4	1.18
Psychological Problems	66.7	48.1	1.39	57.7	1.16
Nursing Care Required (Mean)*	8.9	10.7	0.82	7.4	1.19